PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL   |                               |  | Complete if Known                         |                           |                          |                    |              |  |
|--|-------------------------------|--|---|---------------------------|--------------------------|--------------------|--------------|--|
|  |                               |  | Application Number 10/828,500-Conf. #4294 |                           |                          |                    |              |  |
|  |                               |  | Filing Date                               |                           | April 21, 2004           |                    |              |  |
| For FY 2009  |                               |  | First Named Inv                           | entor -                   | John D. Robinson         |                    |              |  |
| <u> </u>   | Examiner Name H. A. El Chanti |  |   |                           |                          |                    |              |  |
| X Applicant claims small entity status. See 37 CFR 1.27  |                               |  | Art Unit                                  | 2                         | 2457                     |                    |              |  |
| TOTAL AMOUNT OF PAYMENT (\$) 764.00  |                               |  | Attorney Docket No. AST-0001              |                           |                          |                    |              |  |
| METHOD OF PAYMENT (check all that apply)   |                               |  |   |                           |                          |                    |              |  |
| Check Credit Card Money Order None Other (please identify):  |                               |  |   |                           |                          |                    |              |  |
| x Deposit Account Deposit Account Number. 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC   |                               |  |   |                           |                          |                    |              |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |                               |  |   |                           |                          |                    |              |  |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee   |                               |  |   |                           |                          |                    |              |  |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   |                               |  |   |                           |                          |                    |              |  |
| FEE CALCULATION  |                               |  |   |                           |                          |                    |              |  |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES  |                               |  |   |                           |                          |                    |              |  |
|  |                               |  | ARCH FEES                                 | EXAMIN                    | ATION FEES               |                    | ľ            |  |
| Application Type F   | ee (\$)                       | <u>Small Entity</u><br>Fee (\$)        Fee (\$   | Small Entity ) Fee (\$)                   | Fee (\$)                  | Small Entity<br>Fee (\$) | Fees P             | aid (\$)     |  |
| Utility  | 330                           | 165 540  | 270                                       | 220                       | 110                      |                    |              |  |
| Design   | 220                           | 110 100  | 50  | 140                       | 70                       | -                  |              |  |
|  | 220                           | 110 330  | 165                                       | 170                       | 85                       |                    |              |  |
| Reissue  | 330                           | 165 540  | 270                                       | 650                       | 325                      |                    |              |  |
| Provisional  | 220                           | 110 0  | 0   | 0                         | 0                        |                    |              |  |
| 2. EXCESS CLAIM FEES   |                               |  | -   |                           | -                        |                    | Small Entity |  |
| Fee (\$) Fee (\$)  |                               |  |   |                           |                          |                    |              |  |
| Each claim over 20 (including Reissues) 52   |                               |  |   |                           |                          |                    | 26           |  |
| Each independent claim over 3 (including Reissues)   |                               |  |   |                           |                          | 220                | 110          |  |
| Multiple dependent claims  |                               |  |   |                           |                          | 390                | 195          |  |
| Total Claims   |                               |  | ee Paid (\$)                              | Multiple Dependent Claims |                          |                    |              |  |
| - 20 or HP x =   |                               |  | Fee (\$)                                  |                           |                          | Fee Paid (\$)      |              |  |
| HP = highest number of total claims p  | aid for, if gr                | eater than 20.                                   |   |                           |                          | ·                  | _            |  |
| Indep. Claims Extra C  | laims                         | Fee (\$) F                                       | ee Paid (\$)                              |                           |                          |                    |              |  |
| - 3 or HP =  | ×                             | =  |   |                           |                          |                    |              |  |
| HP = highest number of independent   | claims paid                   | for, if greater than 3.                          |   |                           |                          |                    |              |  |
| 3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 |                               |  |   |                           |                          |                    |              |  |
| sheets or fraction thereof.  |                               |  |   | or small er               | itity) for each ac       | iditional 50       |              |  |
|  | Sheets                        |  | dditional 50 or frac                      | tion thereof              | Fee (\$)                 | Fee P              | aid (\$)     |  |
| - 100 =  |                               | 50 =   |   | - ,                       |                          | :                  |              |  |
| 4. OTHER FEE(S)  |                               |  |   |                           |                          | Fees Paid (\$)     |              |  |
| Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surtharge): 2501 Utility issue fee   |                               |  |   |                           |                          |                    | 755.00       |  |
| 8001 Printed copy of patent w/o color 9.00   |                               |  |   |                           |                          |                    |              |  |
| SUBMITTED BY   |                               |  |   |                           |                          |                    |              |  |
| Signature  | 77                            | 7  | Registration No.<br>(Attorney/Agent)      | 40,290                    | Telephone                | (202) 955-3750     |              |  |
| Nome (Brint/Tune) Christinher  | Tob:                          | <del>)                                    </del> | V. merredit (Born)                        | <del></del>               | Date                     | tate July 16, 2010 |              |  |